



Training Manual

REVISED
October 2018

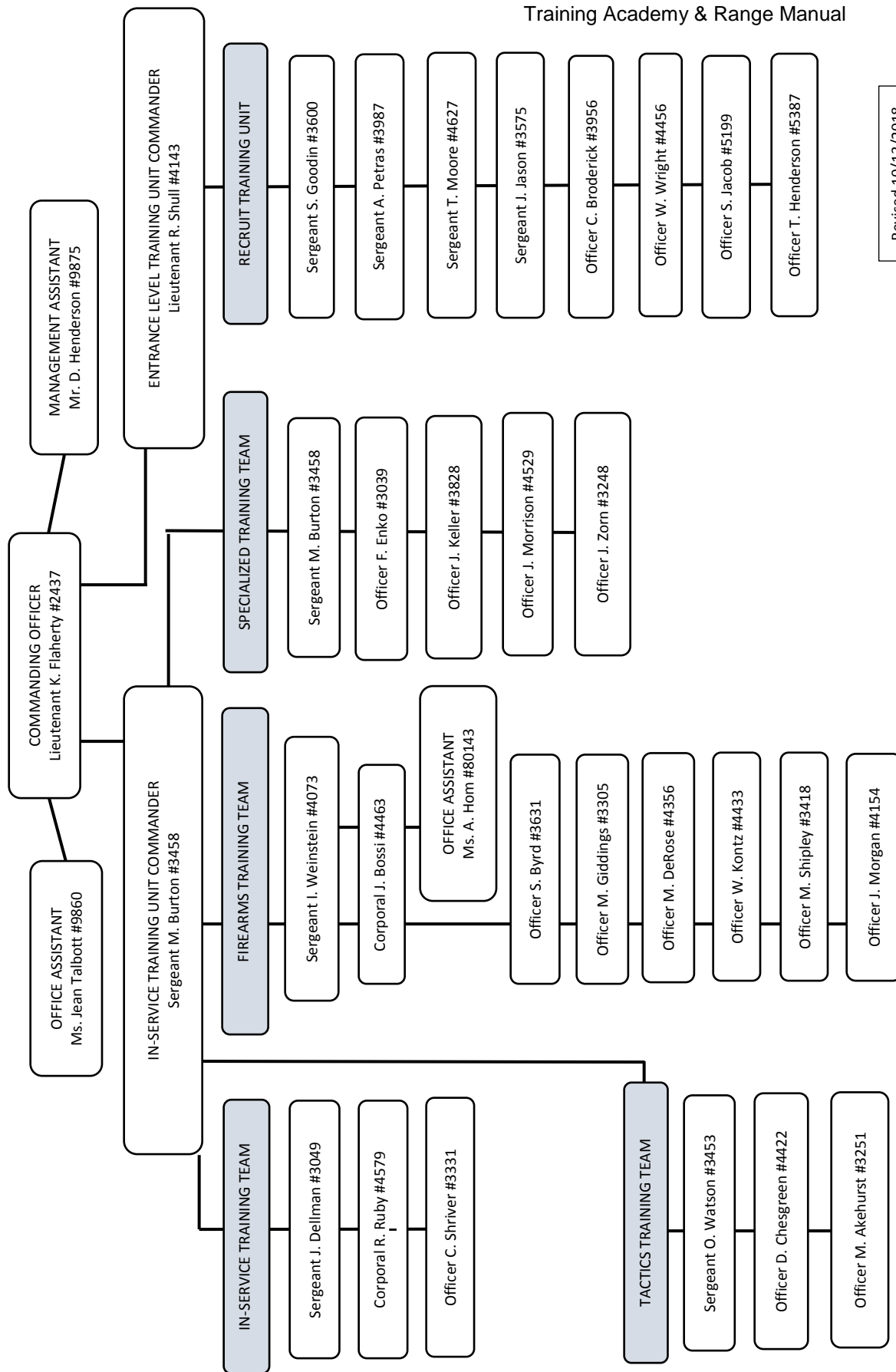

Acting Captain Lt. Kevin J. Flaherty #2437

Approved by the Commanding Officer, Training Section

Date 10/29/2018



BALTIMORE COUNTY POLICE DEPARTMENT
TRAINING SECTION
TABLE OF ORGANIZATION



Revised 10/13/2018



EYE PROTECTION

Employees participating in live-fire, *Simunitions*, and *Airsoft* training are required to wear suitable eye protection at all times. The police department supplies its employees with suitable eye protection.

Prescription glasses are acceptable provided that they are not small in size. If this is the case, safety glasses must also be worn. Personally owned safety glasses may be used with prior approval.

HEARING PROTECTION

Employees participating in live-fire training shall wear suitable hearing protection at all times; typically, this means double ear protection (plugs and muffs). The police department supplies its employees with suitable hearing protection.

Employees assigned to the Firearms Training unit will participate in annual hearing tests.

HAZARD COMMUNICATION PLAN (AT THE RANGE)

- The Hazard Communication Plan establishes safe working habits regarding chemical use, storage and disposal, by allowing employees to access and understand information about the chemicals in the workplace, and by providing training and information on the personal protective equipment available to FTT Staff.
- Members assigned to the Range, whether full time or as adjunct instructors, will understand that participation in the Hazard Communication program training and orientation is mandatory and shall be documented.
- The Range Master is the primary staff member responsible for ensuring that employees are trained and will facilitate the training for all new members and instructors.
- Members must have a reasonable opportunity to ask questions and learn safety requirements at the Range prior to hazardous chemical use.
- Members will know where to access the written Hazard Communication Program, the Chemical Information Lists, and the Material Safety Data Sheets (MSDS).
- Following training, members will initial and date a Form 159, Order/Directive Verification Form.
- The Hazard Communication Plan will be reviewed by all members and instructors assigned to the Range on a yearly basis, and whenever there is a change/revision to the hazardous chemicals used at the Range, or a change to their storage and disposal.
- The written Hazard Communication Program is available at the following locations:
 - Range
 - Safety Officer
 - Training Section Commander's Office



LEAD TESTING

The Baltimore County Police Department conforms to OSHA lead standards. The police department monitors firearms training instructors for lead, and employees are informed of their results. Bi-annual medical BLL monitoring is conducted and funded by the department. In addition, air-purifying masks are provided to Firearms Instructors. The blood lead level of the typical Baltimore County Police Officer is about four. The typical blood level of those continuously assigned to the Firearms Training Unit is slightly higher. As long as the above precautions are observed, employees of Baltimore County should continue to remain safe from excessive exposure.

LEAD ABATEMENT

The indoor range is equipped with a ventilations system that is capable of removing and filtering airborne lead particles. The ventilation system in the indoor range has passed MOSH standards. Periodic abatement of lead particulates from the indoor and outdoor ranges are performed by contracted lead abatement specialists.

POOL TRAINING

During any training that utilizes a swimming pool (or other body of water), instructors will ensure that a pool operator (if applicable), a certified life guard (who will be the Designated Safety Officer), EMS, and Dive Team member(s) are present.

AUTOMATED EXTERNAL DEFIBRILLATORS (AEDs) / FIRST AID KITS

AEDs will be located at designated locations within the Training Section facilities. The Facility Safety Coordinator will assure AEDs are checked and maintained according to the Department's Administrative Manual (Art. 8-3.8).

First Aid Kits will be located at designated locations near the AEDs within the Training Section facilities. The Facility Safety Coordinator will assure the First Aid Kits are checked and maintained.

Recruits participating in the Physical Training (PT) Program will ensure the First Aid backpack and AED are available and accessible during training.

In-Service and Specialized Training Programs which involve rigorous physical exertion and/or extreme weather conditions will ensure an AED is available and accessible during the training.

Please print or type.

Form Approved. OMB No. 2050-0039

| | | | | | | | |
|--|--|---|----------------|--|--|--|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDD980927156 | 2. Page 1 of 1 | 3. Emergency Response Phone 410-368-9170 | 4. Manifest Tracking Number 019714028 JJK | | |
| 5. Generator's Name and Mailing Address BALTIMORE COUNTY POLICE 700 E. JOPPA ROAD BALTIMORE, MD 21286 | | | | | Generator's Site Address (if different than mailing address) | | |
| Generator's Phone: 410-887-2290 | | | | | | | |
| 6. Transporter 1 Company Name ACV ENVIRONMENTAL SERVICES, INC. | | | | | U.S. EPA ID Number NJD003812047 | | |
| 7. Transporter 2 Company Name | | | | | U.S. EPA ID Number | | |
| 8. Designated Facility Name and Site Address CYCLE CHEM, INC 550 INDUSTRIAL DRIVE LEWISBERRY, PA 17339 | | | | | U.S. EPA ID Number PAD067098822 | | |
| Facility's Phone: 717-938-4700 | | | | | | | |

| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | | |
|--------|--|----------------|------|--------------------|-------------------|-----------------|------|------|
| | | No. | Type | | | | | |
| X | UN3262, Corrosive solid, basic, inorganic, n.o.s. (Potassium Hydroxide), 8, II UN1813 POTASSIUM HYDROXIDE SOLID 8, II | 001 | DF | XXX4 | P | None | | |
| X | UN1436, Waste Zinc dust, 4.3 (4.2), II | 001 | DF | XXX4 | P | D001 | D003 | |
| X | UN1993, Waste Flammable liquids, n.o.s. (Toluene), 3, II (ACETONE, TOLUENE) | 001 | DF | XXX40 | P | D001 | F001 | U220 |
| | Non DOT/ Non RCRA Regulated Material (Non Hazardous Chemical Loosepack) | 001 | DF | XX65 | P | None | | |

14. Special Handling Instructions and Additional Information **D60721 SO 62497 SFSO#**

1) 124892 SEPT LP1 (1 x 5) 2) 124893 SEPT LP2 (1 x 5) 3) 124894 SEPT LP3 (1 x 3) 4) 124891 NON HAZARDOUS LOOSEPACK (1 x 15) **15 GAL**

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offor's Printed/Typed Name **DANIELLE N. DAVIS** Signature *[Signature]* Month **10** Day **08** Year **20**

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name **CHRISTOPHER MOETELLEN** Signature *[Signature]* Month **09** Day **08** Year **20**

Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number: _____

18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____

Facility's Phone: _____

18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

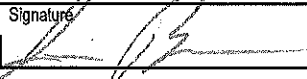
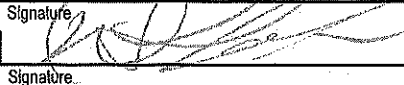
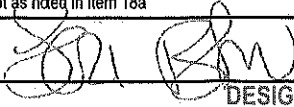
1. **H141** 2. **H141** 3. **H141** 4. _____

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name **Annie E. Hied** Signature *[Signature]* Month **9** Day **8** Year **20**

| | | | | | | | | | |
|---|---|--|-------------------|--|--|--------------------|-------------------|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021667 | 2. Page 1 of 1 | 3. Emergency Response Phone 410 3689170 | 4. Manifest Tracking Number 019232318 JJK | | | | |
| 5. Generator's Name and Mailing Address Jeffrey DeBovis Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 887-0216 | | Generator's Site Address (if different than mailing address) 4350 Old Meadow Branch Road Baltimore, MD 21157 10001 Dulaney Valley Rd Lutherville MD 21093 | | | | | | | |
| 6. Transporter 1 Company Name US Bulk Transport-Inc | | U.S. EPA ID Number PA0987347515 | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15693 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number RAD004835146 | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | No. | Type | | | | |
| | 1. | RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10%) (ERG # 171) | | 1 | DT | Est 22 | Tons | D008 | |
| | 2. | | | | | | | | |
| | 3. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PHS GIS # 6358 DDavis Sale Order # MD 100614 | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name Col James Bossi | | | | | | | | | |
| Signature <i>[Signature]</i> | | | | | | | | | |
| Month Day Year 10 30 18 | | | | | | | | | |
| INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | |
| | Transporter signature (for exports only): _____ | | | | | | | | |
| TRANSPORTER | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | |
| | Transporter 1 Printed/Typed Name Tom Haddon | | | | | | | | |
| Signature <i>[Signature]</i> | | | | | | | | | |
| Month Day Year 10 30 18 | | | | | | | | | |
| Transporter 2 Printed/Typed Name | | | | | | | | | |
| Signature | | | | | | | | | |
| Month Day Year | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| | Item 8. name should also read - Technologies, Inc. Manifest Reference Number: Actual Weight 44260 P | | | | | | | | |
| | Item 12. should read - T. U.S. EPA ID Number | | | | | | | | |
| | 18b. Alternate Facility (or Generator) | | | | | | | | |
| Facility's Phone: | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | | | | |
| Month Day Year | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| 1. H132 2. 3. 4. | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | |
| Printed/Typed Name Heather Heasley | | | | | | | | | |
| Signature <i>[Signature]</i> | | | | | | | | | |
| Month Day Year 10 31 18 | | | | | | | | | |

| | | | | | | | | | | | |
|--|--------|--|--|--|--|---|------|--|-------------------|------------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021667 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410 368 9170 | | 4. Manifest Tracking Number 019232319 JJK | | | |
| | | 5. Generator's Name and Mailing Address Jeffrey DeBbis Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 687-0216 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road 2001 Dulaney Valley Rd Lutherville MD 21093 | | | | | | | |
| 6. Transporter 1 Company Name US Bulk Transport Inc | | U.S. EPA ID Number PAD 987347515 | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yuken, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAD004835146 | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | | | No. | Type | | | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) (ERG 171) | | | | 1 | DT | Est 23 | T | 0008 | |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| | 4. | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PO# GIS# 6358 DDavis Sales Order #MD 100614 | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name James Bossi | | | | | | Signature <i>[Signature]</i> | | Month 10 | | Day 30 | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. | | | | | | <input type="checkbox"/> Export from U.S. | | Port of entry/exit: Date leaving U.S.: | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | | |
| Transporter 1 Printed/Typed Name C. Ford Sphon | | | | | | Signature <i>[Signature]</i> | | Month 10 | | Day 30 | |
| Transporter 2 Printed/Typed Name | | | | | | Signature | | Month | | Day | |
| 18. Discrepancy | | | | | | | | | | | |
| 18a. Discrepancy Indication Space Item 8. name should also read - Technologies, Inc. <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: Actual Weight 51480 P | | | | | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | | | | |
| Facility's Phone: | | | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | |
| 1. H132 | | | | 2. | | | | 3. | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | |
| Printed/Typed Name Heather Hestley | | | | | | Signature <i>[Signature]</i> | | Month 10 | | Day 31 | |

| | | | | | | | | | | |
|--|---|--|--|--|--|---|------|--|-------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021667 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410 368 9170 | | 4. Manifest Tracking Number 019232320 JJK | | |
| | | 5. Generator's Name and Mailing Address Jeffrey DeBuis Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 837-0216 | | Generator's Site Address (if different than mailing address) 1150 Old Meadow Branch Road Westminster, MD 21157 17001 Duloney Valley Rd Lutherville MD 21093 | | | | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC | | U.S. EPA ID Number PAD 987347515 | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAD004835146 | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | | | | No. | Type | | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10%) | | | | 1 | DT | EST 23 | T | D008 |
| | | 2. | | | | | | | | |
| | | 3. | | | | | | | | |
| | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PO# GIS # 6358 04-1014485 Dunn's Sales Order # MD 100614 | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name James Bossi Signature:  Month Day Year 10 31 18 | | | | | | | | | | |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Transporter signature (for exports only): Port of entry/exit: Date leaving U.S.: | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name DANNY SHAFER Signature:  Month Day Year 10 31 18 | | | | | | | | | |
| | Transporter 2 Printed/Typed Name Signature: Month Day Year | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 6. name should also read - Technologies, Inc. Item 11 is not within 10% of actual weight Manifest Reference Number: actual weight 54400 P | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | | |
| | Facility's Phone: | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4. | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Lori Blashaw Signature:  Month Day Year 11 03 18 | | | | | | | | | | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021667 | 2. Page 1 of 1 | 3. Emergency Response Phone 410 3689170 | 4. Manifest Tracking Number 019232323 JJK | |
|--|--|--|---|--|--|-----------------|
| 5. Generator's Name and Mailing Address Jeffrey DeBois Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 | | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21157 1200 Dulcney Valley Rd Lutherville MD 21093 | | | |
| Generator's Phone: (410) 887-0216 | | | U.S. EPA ID Number PAD987347315 | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC. | | | U.S. EPA ID Number | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | | U.S. EPA ID Number PAD004835146 | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | No. | Type | | | |
| X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGII (RQ D008 10#) (ERG # 171) | 1 | DT | EST 23 | T | D008 |
| | 2. | | | | | |
| | 3. | | | | | |
| | 4. | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PO# GIS # 6358 DDavis Sale Order#MD 100614 | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name James Bossi | | | Signature | | Month 11 | Day 1 |
| | | | | | Year 18 | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name GREG NARVELL | | | Signature | | Month 11 | Day 1 |
| | | | | | Year 18 | |
| Transporter 2 Printed/Typed Name | | | Signature | | Month 11 | Day 1 |
| | | | | | Year 18 | |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8. name should also read - Technologies, Inc. actual weight 42900P | | | | | | |
| 18b. Alternate Facility (or Generator) Manifest Reference Number U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | Month | Day |
| | | | | | Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. H232 | 2. | 3. | 4. | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | |
| Printed/Typed Name Lori Blashaw | | | Signature | | Month 11 | Day 1 |
| | | | | | Year 18 | |

| | | | | | | | | |
|---|--|--|-------------------|---|--|----------------------------|----------------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021687 | 2. Page 1 of 1 | 3. Emergency Response Phone 410 368 9170 | 4. Manifest Tracking Number 019232324 JJK | | | |
| 5. Generator's Name and Mailing Address Jeffrey DeBois | | Generator's Site Address (if different than mailing address) Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 1250 Old Meadow Branch Road Westminster, MD 21157 12001 Wilney Valley Rd Lutherville MD 21097 | | | | | | |
| Generator's Phone: (410) 887-0216 | | U.S. EPA ID Number PAD 987347515 | | | | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC | | U.S. EPA ID Number | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAD004835146 | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes |
| | | | | No. | Type | | | |
| | X 1. | RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) (ERG# 171) | | 1 | DT | 25T 23 | T | D008 |
| | 2. | | | | | | | |
| | 3. | | | | | | | |
| 4. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information D PO# GIS # 6358 DDavis Sale Order # MD 100614 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Offeror's Printed/Typed Name James Bossi | | | | Signature | | Month Day Year 11 1 18 | | |
| TRANSPORTER INTL | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| | Transporter 1 Printed/Typed Name DANNY SHAFER | | | | Signature | | Month Day Year 11 01 18 | |
| Transporter 2 Printed/Typed Name | | | | Signature | | Month Day Year | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8 name should also read - Technologies, Inc. Manifest Reference Number actual weight 49320 P | | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| | Facility's Phone: | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) | | | | | | Month Day Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | |
| 1. H232 | | 2. | | 3. | | 4. | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | |
| Printed/Typed Name Lori Blashaw | | | | Signature | | Month Day Year 11 10 18 | | |

1812-4239

Please print or type.

Form Approved. OMB No. 2050-0039

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|--|---|---|--|---|--|---|-------|--|-------------------|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021687 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410 368 9170 | | 4. Manifest Tracking Number 019232326 JJK | | | |
| | | 5. Generator's Name and Mailing Address Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 887-0216 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21157 12001 Dulany Valley Rd Lutherville MD 21093 | | | | | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC. | | U.S. EPA ID Number PAD987347515 | | 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAD004835146 | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | | | No. | Type | | | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) (ERG #171) | | | | 1 | OT 22 | T | | D008 | |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| | 4. | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PO# GIS # 6358 DDavis Sale Order # MD 100614 | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name M. DEPOSE 4356 | | | | | | Signature <i>[Signature]</i> | | Month Day Year 11 01 18 | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name David Boyd Signature <i>[Signature]</i> Month Day Year 11 01 18 Transporter 2 Printed/Typed Name Signature _____ Month Day Year _____ | | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8, name should also read - Technologies, Inc. Item 11, 1's not within 10% of actual weight. Manifest Reference Number: actual weight 35220 P 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____ | | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H232 2. 3. 4. | | | | | | | | | | |
| | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Lori Blashaw Signature <i>[Signature]</i> Month Day Year 11 01 18 | | | | | | | | | | |
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|---|---|---|--|---|--|---|-----------|--|-------------------|-----------------|----------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021667 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410.368.9170 | | 4. Manifest Tracking Number 019232365 JJK | | | |
| | | 5. Generator's Name and Mailing Address Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 887-0216 | | Generator's Site Address (if different than mailing address) 2001 Dulaney Valley Rd Lutherville, MD 21093 | | | | | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC | | U.S. EPA ID Number PA0987347515 | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PA0004835146 | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | | | No. | Type | | | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10%) | | | | 1 | DT | EST 18 | T | 0008 | |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| | 4. | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) GIS# 6358 PO# 04-1014485 DDavis Sales Order #MD 100614 (LDR on File) | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Offeror's Printed/Typed Name | | | | | | Signature | | Month | | Day Year | |
| | | | | | | | | 11 | | 1 18 | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | |
| | Transporter 1 Printed/Typed Name JON MILLER | | | | | | Signature | | Month | | Day Year |
| | | | | | | | | 11 | | 01 18 | |
| Transporter 2 Printed/Typed Name James Bossi | | | | | | Signature | | Month | | Day Year | |
| | | | | | | | | 11 | | 1 18 | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8. name should also read - Technologies, Inc. Item 11. IS NOT WITHIN 10% OF ACTUAL WEIGHT. Manifest Reference Number: actual weight 23960 P | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | | | |
| | Facility's Phone: | | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | | | |
| | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | |
| 1. H132 | | 2. | | 3. | | 4. | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | |
| Printed/Typed Name Lori Blashaw | | | | | | Signature | | Month | | Day Year | |
| | | | | | | | | 11 | | 12 18 | |

| | | | | | | | | | | | |
|--|--|---|--|---|----------------------------|---|--------------------|--|-----------------|--|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021657 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410 368 9170 | | 4. Manifest Tracking Number 019232317 JJK | | | |
| | | 5. Generator's Name and Mailing Address Jeffrey DeBois Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21154 2001 Dulaney Valley Rd Lutherville, MD 21093 | | | | | | | |
| Generator's Phone: (410) 887-0216 | | 6. Transporter 1 Company Name U.S. Bulk Transport Inc | | U.S. EPA ID Number MD0987347515 | | 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 | | Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PA0004835146 | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) | | | 1 DT | | EST 23 | T | D008 | | |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| | | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information GISH 6358 ERG# 171 DDavis Sale Order#MD 100614 | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name James Bossi | | | | Signature <i>[Signature]</i> | | | | Month Day Year 4/6/18 | | | |
| INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Jon Miller Signature <i>[Signature]</i> Month Day Year 10/30/18 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____ | | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8. name should also read - Technologies, Inc. Manifest Reference Number: Actual Weight 46880P | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Facility's Phone: _____ U.S. EPA ID Number _____ | | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____ | | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. N132 2. _____ 3. _____ 4. _____ | | | | | | | | | | |
| 20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Heather Heasley Signature <i>[Signature]</i> Month Day Year 10/31/18 | | | | | | | | | | | |

Please print or type.

Form Approved. OMB No. 2050-0039

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|---|---|---|---------------------------------|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021657 | 2. Page 1 of 1 | 3. Emergency Response Phone 410 368 9170 | 4. Manifest Tracking Number 019232321 JJK |
| 5. Generator's Name and Mailing Address Jeffrey DeBosis Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21157 12001 Dulany Valley Rd Lutherville MD 21093 | | | |
| Generator's Phone: (410) 667-0216 | | U.S. EPA ID Number PA0987347515 | | | |
| 6. Transporter 1 Company Name US BULK TRANSPORT INC | | U.S. EPA ID Number | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAJ004835146 | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity |
| | | | No. | Type | 12. Unit Wt./Vol. |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ 1008 104) (ERG # 171) | 1 | DT | EST 23 T |
| | | 2. | | | |
| | | 3. | | | |
| | | 4. | | | |
| 13. Waste Codes 0008 | | | | | |
| 14. Special Handling Instructions and Additional Information D) PO# 615# 6350 DDavis Sale Order MD 100614 | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | |
| Generator's/Officer's Printed/Typed Name D. J. Ruby 4549 | | Signature <i>[Signature]</i> | | Month Day Year 10/31/18 | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | |
| | Transporter 1 Printed/Typed Name JOHN MILLER | | Signature <i>[Signature]</i> | | Month Day Year 10/31/18 |
| | Transporter 2 Printed/Typed Name | | Signature | | Month Day Year |
| DESIGNATED FACILITY | 18. Discrepancy | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | |
| | Item 8. Name should also read - Technologies, Inc. Manifest Reference Number: actual weight 50/20 P | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | |
| | Facility's Phone: _____ | | | | |
| | 18c. Signature of Alternate Facility (or Generator) | | | | Month Day Year |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | |
| | 1. H132 | 2. | 3. | 4. | |
| | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | |
| | Printed/Typed Name Lori Blashaw | | Signature <i>[Signature]</i> | | Month Day Year 11/01/18 |

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|---|---|---|--|---|--|-------------------|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021687 | 2. Page 1 of 1 | 3. Emergency Response Phone 410 368 9170 | 4. Manifest Tracking Number 019232322 JJK | | | |
| | | 5. Generator's Name and Mailing Address Jeffrey Boebris Baltimore County Property Management 12200 Long Green Pike Glen Arvo, MD 21057 Generator's Phone: (410) 887-0216 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21157 12001 Dulany Valley Rd Lutherville MD 21093 | | | | |
| 6. Transporter 1 Company Name US Bulk Transport Inc #1239 | | U.S. EPA ID Number PAD987347515 | | 7. Transporter 2 Company Name U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number DAD004835146 | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) (ERG# 171) | 1 | DT | Est 22 Tons | Tons | D008 | |
| | | 2. | | | | | | |
| | | 3. | | | | | | |
| | | 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) PO# GIS # 6358 DDavisGale Order#MD 100614 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Offeror's Printed/Typed Name James Bossi | | Signature | | Month 11 | | Day 1 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | Port of entry/exit: Date leaving U.S.: | | Year 18 | | | | |
| TRANSPORTER | 17. Transporter Acknowledgment of Receipt of Materials | | Signature | | Month 11 | | Day 1 | |
| | Transporter 1 Printed/Typed Name Tom Haddon | | Signature | | Year 18 | | | |
| DESIGNATED FACILITY | 18. Discrepancy Item # 11 is not within 10% of the actual weight & should not read - Tons | | Signature | | Month 11 | | Day 1 | |
| | 18a. Discrepancy Indication Space Item 8. name should also - Technologies, Inc. | | Signature | | Year 18 | | | |
| | 18b. Alternate Facility (or Generator) | | Manifest Reference Number: actual weight 56490 F | | U.S. EPA ID Number | | | |
| | Facility's Phone: | | Signature | | Month 11 | | Day 1 | |
| | 18c. Signature of Alternate Facility (or Generator) | | Signature | | Year 18 | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | |
| 1. H132 | | 2. | | 3. | | 4. | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | |
| Printed/Typed Name Lori Blashaw | | Signature | | Month 11 | | Day 1 | | |
| | | | | Year 18 | | | | |

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|---|---|--|----|--|--|---|--|--|-------------------|--------------------------------------|---------------------------------|-------------|------------|------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDR000021657 | | 2. Page 1 of 1 | | 3. Emergency Response Phone 410 368 9170 | | 4. Manifest Tracking Number 019232325 JJK | | | | | | |
| | | 5. Generator's Name and Mailing Address Jeffrey Debbis Baltimore County Property Management 12200 Long Green Pike Glen Arm, MD 21057 Generator's Phone: (410) 587-0216 | | Generator's Site Address (if different than mailing address) 1250 Old Meadow Branch Road Westminster, MD 21157 12001 Dulaney Valley Rd Lutherville MD 21093 | | | | | | | | | | |
| 6. Transporter 1 Company Name A.S. Bulk Transport Inc | | U.S. EPA ID Number PAD 987347515 | | | | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | | | | |
| 8. Designated Facility Name and Site Address Max Environmental 233 Max Lane Yukon, PA 15698 Facility's Phone: (724) 722-3500 | | U.S. EPA ID Number PAD004835146 | | | | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | | | | |
| | X | 1. RQ, NA3077 Hazardous Waste Solid n.o.s. (lead) 9, PGIII (RQ D008 10#) (ERG # 171) | | | | 1 OT | | 24 | T | 0008 | | | | |
| | | 2. | | | | | | | | | | | | |
| | | 3. | | | | | | | | | | | | |
| | | 4. | | | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information D) PO# GES # 6358 DDEavis Sale Order#MD 100614 | | | | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | | | | |
| Generator's/Offeror's Printed/Typed Name James Bossi | | | | | | | | | | Signature <i>[Signature]</i> 4463 | | Month 11 | Day 1 | Year 18 |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | | | | |
| TRANSPORTER | Transporter 1 Printed/Typed Name Gregory Gibbs | | | | | | | | | | Signature <i>[Signature]</i> | Month 11 | Day 01 | Year 18 |
| | Transporter 2 Printed/Typed Name | | | | | | | | | | Signature | Month | Day | Year |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Item 8 name should also read - Technologies, Inc. Manifest Reference Number: actual weight 49180P | | | | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Facility's Phone: _____ U.S. EPA ID Number: _____ | | | | | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year | | | | | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | | | |
| | 1. H132 | 2. | 3. | 4. | | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | | | | |
| Printed/Typed Name Lori Blashaw | | | | | | | | | | Signature <i>[Signature]</i> | Month 11 | Day 10 | Year 18 | |

| | | | | | | | | | | | |
|--|---|---|--|----------------|--|---|----|--|-------------------|-----------------|-----------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number MDD980927156 | | 2. Page 1 of 2 | | 3. Emergency Response Phone 410-368-9170 | | 4. Manifest Tracking Number 015832296 JJK | | | |
| | | 5. Generator's Name and Mailing Address BALTIMORE COUNTY POLICE 700 E. JOPPA ROAD BALTIMORE, MD 21286 Generator's Phone: 410-887-2290 Attn: <i>Kerriam Lawrence</i> | | | | | | Generator's Site Address (if different than mailing address) | | | |
| 6. Transporter 1 Company Name ALLSTATE POWER VAC, INC. | | U.S. EPA ID Number NJ0003812047 | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| 8. Designated Facility Name and Site Address CYCLE CHEM, INC 550 INDUSTRIAL DRIVE LEWISBERRY, PA 17339 Facility's Phone: 717-938-4700 | | U.S. EPA ID Number PAD067098822 | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | X | 1. UN1950, Waste Aerosols, 2.1. | | | | 1 | DF | 15 | P | D001 | |
| | X | 2. UN3286, Waste Flammable liquid, toxic, corrosive, n.o.s. (Ethanol, Chloroform), 3 (6.1, 8), II | | | | 1 | DF | 30 | P | D001 | D002 D022 |
| | X | 3. UN1993, Waste Flammable liquids, n.o.s. (Acetone, Hexane), 3, II | | | | 1 | DF | 15 | P | D001 | U002 |
| | X | 4. UN1436, Waste Zinc dust, 4.3 (4.2), III | | | | 1 | DF | 2 | P | D001 | D003 |
| 14. Special Handling Instructions and Additional Information D33844 SO 34221 SFSO#BLP100359 1) 91871 AEROSOLS (1 x 5) 2) 91872 MIXED LAB WASTE (1 x 5) 3) 91873 BCPD LP 10/14 FLAM LIQ (1 x 15) 4) 91874 BCPD LP 10/14 DWW (1 x 5) | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name <i>Michael D.</i> Signature <i>[Signature]</i> Month <i>10</i> Day <i>14</i> Year <i>19</i> | | | | | | | | | | | |
| INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <i>Daniel Abunian</i> Signature <i>[Signature]</i> Month <i>10</i> Day <i>14</i> Year <i>19</i> Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ | | | | | | | | | | |
| TRANSPORTER | 18. Discrepancy | | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) _____ Manifest Reference Number: _____ U.S. EPA ID Number _____ | | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____ | | | | | | | | | | |
| DESIGNATED FACILITY | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. _____ 2. _____ 3. _____ 4. _____ | | | | | | | | | | |
| | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ | | | | | | | | | | |
| | EPA RFI 000017 | | | | | | | | | | |

| UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet) | | 21. Generator ID Number | 22. Page | 23. Manifest Tracking Number | | | |
|---|---|-------------------------|----------|------------------------------|----------------------|-----------------|-----------|
| | | MDD980927156 | 2 of 2 | 015832296.IJK | | | |
| 24. Generator's Name BALTIMORE COUNTY POLICE 700 E. JOFFA ROAD BALTIMORE, MD 21286 | | | | | | | |
| 25. Transporter Company Name | | | | U.S. EPA ID Number | | | |
| 26. Transporter Company Name | | | | U.S. EPA ID Number | | | |
| 27a. HM | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers | | 29. Total Quantity | 30. Unit Wt./Vol. | 31. Waste Codes | |
| | | No. | Type | | | | |
| X | 5) UN1500, Waste Sodium nitrite, 5.1 (6.1), III | 1 | DF | 2 | P | D001 | |
| X | 6) UN2810, Waste Toxic, liquids, organic, n.o.s. (Chloroform, 1- | 1 | DF | 8 | P | D022 | U044 |
| X | 7) UN3264, Waste Corrosive liquid, acidic, inorganic, n.o.s. (Hydrochloric acid, Phosphoric acid), 8, II | 1 | DF | 30 | P | D002 | |
| X | 8) UN2920, Waste Corrosive liquids, flammable, n.o.s. (Formaldehyde, Tartaric acid), 8 (3), II | 1 | DF | 5 | P | D001 | D002 U122 |
| X | 9) UN3266, Waste Corrosive liquid, basic, inorganic, n.o.s. (Ammonium hydroxide, Sodium hydroxide), 8, II | 1 | DF | 12 | P | D002 | |
| X | 10) UN2031, Waste Nitric acid, 8 (5.1), I | 1 | DF | 2 | P | D001 | D002 |
| | 11) Non DOT/Non RCRA Material (Sodium Tartrate, Ethylene Glycol) | 1 | DF | 10 | P | NONE | |
| 32. Special Handling Instructions and Additional Information Document #: D33844 5) 91875 BCPD LP 10/14 SODIUM NITRITE (1X5) 6) 91876 BCPD LP 10/14 (1X5) 7) 91877 BCPD LP 10/14 INORGANIC ACID (1X15) 8) 91883 BCPD LP 10/14 FLAMMABLE ACID (1X5) 9) 91884 BCPD LP 10/14 CORROSIVE BASIC (1X5) 10) 91885 BCPD LP 10/14 ACID OXIDIZER (1X5) 11) 91887 BCPD LP 10/14 NON REG (1X5) (X) (X) | | | | | | | |
| 33. Transporter Acknowledgment of Receipt of Materials Printed/Typed Name Signature Month Day Year | | | | | | | |
| 34. Transporter Acknowledgment of Receipt of Materials Printed/Typed Name Signature Month Day Year | | | | | | | |
| 35. Discrepancy | | | | | | | |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |

Certificate of Recycling

This certificate hereby acknowledges receipt and use of

10,553

Pounds of Recovered Lead Bullets

From

**Baltimore County Police Department
2001 Delaney Valley Road
Lutherville, MD 21093**

Received On:

4/8/2020



The RECOVERED lead was RECYCLED FOR RE-USE in the UNITED STATES



MT2, LLC (Metals Treatment Technologies)
14045 West 66th Avenue; Arvada, CO 80004
303-456-6977 (p) 303-456-6998 (f) www.mt2.com



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Bullet Proof Your Environment!